Exhibit 300: Capital Asset Summary

Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview & Summary Information

Date Investment First Submitted: 2009-06-30

Date of Last Change to Activities:

Investment Auto Submission Date: 2012-02-28

Date of Last Investment Detail Update: 2012-02-28

Date of Last Exhibit 300A Update: 2012-07-23

Date of Last Revision: 2012-02-28

Agency: 009 - Department of Health and Human Services Bureau: 38 - Centers for Medicare and

Medicaid Services

Investment Part Code: 01

Investment Category: 00 - Agency Investments

1. Name of this Investment: CMS Interoperability & Standardization - Provider ID (NPPES)

2. Unique Investment Identifier (UII): 009-000004415

Section B: Investment Detail

 Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.

The National Plan and Provider Enumeration System (NPPES) enumerates health plans and providers in compliance with the requirements of HIPAA. HIPAA requires the Secretary of HHS to adopt a national standard identifier for all health plans and providers for use in the health care system. This scope extends to all heath plans and providers not just Medicare and Medicaid. NPPES processes applications from health care providers for National Provider Identifiers (NPIs). NPIs are identification numbers that health care providers are required by regulation to obtain and use to identify themselves in electronic health transactions, such as electronic claims and eligibility inquiries. NPIs do not change and do not expire. NPPES captures identifying information about health care providers. It processes each application to ensure the uniqueness of the health care provider, and assigns the health care provider an NPI. NPPES establishes a record for every health care provider it enumerates. NPPES processes updates and changes to the data in an enumerated health care provider's record and deactivates and reactivates a health care provider's NPI upon request by the health care provider. NPPES makes available, upon approved requests, information about each enumerated health care provider, including the NPI. NPPES assists with reducing the incidence of provider misidentification. It helps to differentiate between fraudulent providers and those who make honest billing mistakes. It allows for easy access to

obtain NPIs. Finally, it supports defining, developing, implementing, and maintaining uniform data standards for the exchange of health care information in our programs, as well as across the nation's health care system. This system went into production during FY 2006. NPPES supports HHS & CMS goals such as Expanded E-Government by implementing a web-based application for providers to obtain their NPI, improving system and technology information management, providing efficient business processes, and maintaining data integrity. NPPES is being expanded (funding reported elsewhere as the money is coming from various other components) to support HITECH electronic healthcare initiatives, Central Provider Portal activities, and health plan ID enumeration.

- 2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.
 - NPPES provides all healthcare providers with a required NPI, which is a uniquely identifying number. This identification allows for clean and accurate tracking, record, auditing, investigating, etc; in turn saving time, money, resources, etc for the government and taxpayers. NPPES is being modified (funding reported elsewhere) to support HITECH, health plan ID enumeration, Central Provider portal, and other modernization and electronic health care initiatives.
- 3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.

Incorporated IRS TIN matching, updated NPPES and other CMS systems with verified dead provider information, performed extensive data clean up to ensure integrity, monitoring SSA SSN validation attempts to flag for fraudulent activities, extensive enhancements for the customer service (Enumerator) agents' interface, extensive functionality changes to support the Electronic Health Record incentive program (HITECH), and adding modifications to enumerate health plans and support electronic healthcare modernization with the Central Provider Portal.

4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).

Further enhancements for the HITECH project, also a very large redesign to allow for the enumeration of Health Plans, and an enhanced and more global I&A (Identification and Authorization) module. We will also be teaming with another system to develop a Provider Central Portal.

5. Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.

2004-05-24

Section C: Summary of Funding (Budget Authority for Capital Assets)

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Table I.C.1 Summary of Funding									
	PY-1	PY	CY	ВҮ					
	& 	2011	2012	2013					
	Prior								
Planning Costs:	\$0.0	\$0.0	\$0.0	\$0.0					
DME (Excluding Planning) Costs:	\$12.7	\$0.0	\$0.0	\$0.0					
DME (Including Planning) Govt. FTEs:	\$0.0	\$0.0	\$0.0	\$0.0					
Sub-Total DME (Including Govt. FTE):	\$12.7	0	0	0					
O & M Costs:	\$5.2	\$1.5	\$1.5	\$1.5					
O & M Govt. FTEs:	\$0.2	\$0.1	\$0.1	\$0.1					
Sub-Total O & M Costs (Including Govt. FTE):	\$5.4	\$1.6	\$1.6	\$1.6					
Total Cost (Including Govt. FTE):	\$18.1	\$1.6	\$1.6	\$1.6					
Total Govt. FTE costs:	\$0.2	\$0.1	\$0.1	\$0.1					
# of FTE rep by costs:	4	1	1	1					
Total change from prior year final President's Budget (\$)		\$-0.4	\$-0.6						
Total change from prior year final President's Budget (%)		-21.79%	-26.30%						

2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:

The current funding levels for this investment were developed through the CMS' annual CPIC process. The funding levels for NPPES do not equal the President's Budget because the CMS portfolio has been adjusted to reflect re-evaluated Agency priorities.

Section D: Acquisition/Contract Strategy (All Capital Assets)

	Table I.D.1 Contracts and Acquisition Strategy										
Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Туре	PBSA ?	Effective Date	Actual or Expected End Date
Awarded	7530	HHSM500200 400130G	GS35F4797H	4730							
Awarded	7530	<u>HHSM500T00</u> <u>01</u>	HHSM5002007 00022I	7530							

2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:

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Exhibit 300B: Performance Measurement Report

Section A: General Information

Date of Last Change to Activities:

Section B: Project Execution Data

Section B. Project Exec	ation bata									
Table II.B.1 Projects										
Project ID	Project ID Project Name				Project Project Start Date Completion Date		Project Lifecycle Cost (\$M)			
		NONE								
	Activity Summary									
Roll-up of Information Provided in Lowest Level Child Activities										
Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities		
NONE										
Key Deliverables										
Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days)	Schedule Variance (%)		

NONE

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Section C: Operational Data

Table II.C.1 Performance Metrics									
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency	
percentage of time system is available during normal busy hours.	%	Technology - Reliability and Availability	Over target	95.000000	96.000000	97.000000	97.000000	Monthly	
number of days to process a clean web application	number	Customer Results - Timeliness and Responsiveness	Under target	7.000000	6.000000	5.000000	5.000000	Monthly	
percentage of web applications that require manual intervention	%	Process and Activities - Quality	Under target	20.000000	19.000000	17.000000	19.000000	Monthly	
number of days for Enumerator to process a clean web application	number	Customer Results - Timeliness and Responsiveness	Under target	20.000000	19.000000	17.000000	18.000000	Monthly	
number of days for Enumerator to process an unclean paper application	number	Process and Activities - Productivity	Under target	30.000000	27.000000	25.000000	26.000000	Monthly	
percentage of NPPES data available for Data Dissemination	%	Mission and Business Results - Services for Citizens	Over target	100.000000	100.000000	100.000000	100.000000	Monthly	
percentage of new applicants receiving an NPI	%	Mission and Business Results - Services for Citizens	Over target	100.000000	100.000000	100.000000	100.000000	Monthly	